

01-31-02

A

GRAYCARY. TECHNOLOGY'S LEGAL EDGE®

4365 Executive Drive, Suite 1100
 San Diego, CA 92121-2133
 www.graycary.com
 OJ 858-677-1456
 FJ 858-677-1465

January 28, 2002

ATTORNEY DOCKET NO.: JHU1630-1

ATTN: BOX PATENT APPLICATION

Commissioner for Patents
 Washington, D.C. 20231

J1002 U.S. PTO
 10/059579
 01/28/02

Presented for filing is a new **continuation-in-part** patent application of:

APPLICANTS: Saraswati Sukumar, Ella Evron, William C. Dooley, Nicoletta Sacchi,
 Nancy Davidson and Mary Jo Fackler
 TITLE: ABERRANTLY METHYLATED GENES AS MARKERS OF BREAST
 MALIGNANCY

Enclosed are the following papers, including all those required for a filing date under 37
 C.F.R. § 1.53(b):

Pages of Specification	79
Pages of Claims	6
Pages of Abstract	1
Pages of Declaration	4
Sheets of Drawings - Formal	28

Under 35 U.S.C. § 120, this application claims the benefit of prior U. S. Application
 No. 09/771,357, filed January 26, 2001, co-pending, which is incorporated herein by
 reference in its entirety.

EXPRESS MAIL Number. EV 047297808 US
 Date of Deposit: January 28, 2002

I hereby certify that this paper is being deposited with the United States Postal Service
 "EXPRESS MAIL Post Office to Addressee" service under 37 C.F.R. § 1.10 on the
 date indicated above and is addressed to. ATTN: BOX PATENT APPLICATION,
 Commissioner for Patents, Washington, D.C. 20231

JASON BERRY

(Name of Individual Depositing with P.O.)

(Signature of Individual Depositing with P.O.)

GRAY CARY WARE & FREIDENRICH LLP

Docket No.: JHU1630-1

ATTN: BOX PATENT APPLICATION

January 28, 2002

Page Two

Enclosures:

- Check No. 500148 in the amount of \$586.00; and
- Return Receipt Postcard

Applicants claim small entity status in the above-identified application. Pursuant to 37 C.F.R. § 1.27, a verified statement claiming small entity status is not required.

The filing fee is calculated as follows:

	Number Filed			Number Extra		Rate			Fee	
						Large Entity	Small Entity		Large Entity	SMALL Entity
Total Claims	44	-20	=	24	X	\$18	\$09	=	\$00	\$216.00
Independent Claims	3	-3	=	0	X	\$84	\$42	=	\$00	\$00
Multiple Dependent Claims Presented: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						\$280	\$140		\$00	\$00
						BASIC FEE			\$740.00	\$370.00
						TOTAL FEE			\$00	\$586.00

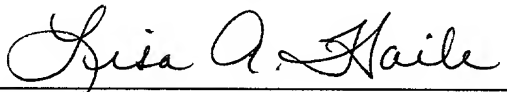
Enclosed please find Check No. 500148 in the total amount of \$586.00; which consist of \$370.00 for the basic filing fee and \$216.00 for twenty-four (24) additional dependent claims. Please charge any additional required fees or credit any overpayments, to Deposit Account 50-1355, referencing the Attorney Docket number shown above. A copy of this transmittal letter is attached.

If this application is found to be INCOMPLETE, or if it appears that a telephone conference would helpfully advance prosecution, please telephone the undersigned at (858) 677-1456 .

Kindly acknowledge receipt of this application by returning the enclosed postcard.

Respectfully submitted,

GRAY CARY WARE & FREIDENRICH LLP



Lisa A. Haile, J.D., Ph.D.

Registration No. 38,347

January 28, 2002

Date

LAH/JML:ct

Enclosures

20020128 012802